Question	Answer(s)
Will FQHCs be paid encounter/PPS rate for the 99441, 99442 or 99443 code with a GT modifier?	These codes are the telephonic E/M codes. Centers will be reimbursed fee-for-serivce for these codes, as the state plan and federal regulations require a face to face visit to trigger an encounter rate.
Just to be clear for Telehealth Medical services, Zoom, Facetime, etc. our provider provides a 99213 the FQHC would be reimbursed enhanced PPS/encounter rate. Audio only is fee for servi	
WHAT REVENUE CODE SHOULD RHC'S USE So Well Child Checks greater than 2 are covered by Telehealth? I think this info is different than info presented yesterday. Just want to clarify.	All Centers should bill whichever revenue code that they would have billed had the service been provided in person. Correct. After the webinar on Tuesday for
	Physicians, OHCA made the decision to reimbure for well child checks conducted via telehealth for children over the age of 2.
I was instructed to bill T1015 for our telehealth visits, is this not correct?	That is correct, you should bill T1015 with the GT modifier if the service was provided via telehealth.
I may have missed this what place of service should be used for the telephone calls 99441, 99442	You can eithe ruse POS 11 or 02
If a FQHC is enrolled, but we use a provider to cover that is not enrolled yet, will their services be covered or will you retro pay?	Please submit the provider's enrollment application to OHCA using regular contracting processes and explain the justification for requesting a back-dated contract. For questions or inquiries - Email providerenrollment@OKHCA.org
If a visit starts as a telehealth visit and due to tech problems, the visit is only able to be completed by telephone only. Can the FQHC still bill the claim out as a telehealth visit?	Yes.
Hello! This is not specific to COVID-19, but has guidance been released on the modifier health centers should use for same-day visits?	The FQHC's will bill as they do today and add an XE modifier to the T1015 procedure code line to indicate same day encounter which requires different diagnosis. Our systme work is near completion.
Since you commented to timeis there a time amount?	Use all current reimbursement timing rules as if the service was provided in person.
Is there a minimum time requirement for encounters?	Use all current reimbursement timing rules as if the service was provided in person.
Hi, can APP's (nurse practitioners/PA's) bill for telemedicine for psychiatry, if so where can we find these codes?	Yes. PA's and APRNs bill the same codes as physicians. See 317:30-5-11.
Does Ok recognize G0071 as a secondary claims payment to Medicare?	Providers should note on their EOMB that the insurance requires G071 but OHCA requires GT modifier on existing CPT codes, TPL department wil use this note when processing claims. Medicare claims will be processed as billed.
What is the advantage of using 99943 as opposed to 99213?	99943 is a telephonic code and is only available for use for established patients, 99213 is an E/M code for established patients that can be billed by telehealth using the GT modifier.
We have patient's that do not have access to internet or smart phones. Can we still as an FQHC bill a telehealth?	You can bill the telephonic E/M codes, but can only bill these fee for service on established clients. These codes do not trigger an encounter rate.
Is there a special form for temp enrollment of providers?	No, enroll as usual. For questions about enrollment please contact providerenrollment@okhca.org
How would email communication be billed?	OHCA does not reimburse for email communication or store and forward communications.
I may have missed this. How does fee for service codes/reimbursements differ from telehealth? Thank you!	The telephonic E/M codes are billed fee for service and do not trigger the encounter rate because it's not face to face.
Are new patient visits allowed via 2 way audio video or only in person at this time	New patient can be be provided by interactive two way audio/video via telehealth and billed with the GT modifier.
Regarding the modifiers that relate to the same day billing rule change that went into effect last September, are those available? During this crisis are there changes to same day billing rules?	The FQHC's will bill as they do today and add an XE modifier to the T1015 procedure code line to indicate same day encounter which requires different diagnosis. Our systme work is near completion.